

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Gary L. Ackerman, Inc.

Full Name (Last, First, Middle Initial) A. Heath Shuler for Congress		Transaction ID: D11577 Date of Disbursement 09 / 25 / 2007
Mailing Address PO Box 97		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Hazelwood	State NC	
Zip Code 28738		
Purpose of Disbursement Contribution NC-11 US House Category/Type 011		
Candidate Name Mr. Heath Shuler		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 11	

Full Name (Last, First, Middle Initial) B. Israel Center		Transaction ID: D11582 Date of Disbursement 09 / 25 / 2007
Mailing Address 167-11 73rd Ave.		Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Flushing	State NY	
Zip Code 11366		
Purpose of Disbursement Contributions Category/Type 012		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. John Hall for Congress		Transaction ID: D11584 Date of Disbursement 09 / 25 / 2007
Mailing Address 46 Foster Rd. Suite 1		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Hopewell Junction	State NY	
Zip Code 12533		
Purpose of Disbursement Contribution NY-19 US House Category/Type 011		
Candidate Name Hon. John Hall		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 19	

SUBTOTAL of Disbursements This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	